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October 4, 1993

Box ISSUE FEE
Commissioner of Patents
and Trademarks
Washington, D.C. 20231

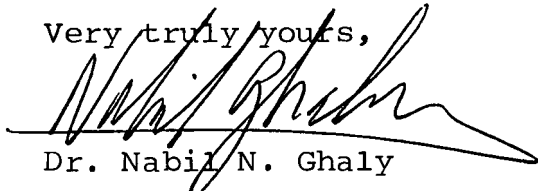
Ref: Patent Application Number 07/745,465
Art Unit 3304 - Filing Date 09/03/91

Gentlemen,

Enclosed please find the completed Part B of the Notice of Allowance and Issue Fee Due together with a check in the amount of \$585.00 in connection with the subject patent application.

Thank you for your cooperation in this matter.

Very truly yours,



Dr. Nabil N. Ghaly

Encl.

Certified mail P 340 702 288
return receipt requested

585-272 B **PART B—ISSUE FEE TRANSMITTAL**

MAILING INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advances orders and notification of maintenance fees will be mailed to addressee entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block below; or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications. The payment of the Issue Fee or thereafter. **See reverse for Certificate of Mailing.**

1. CORRESPONDENCE ADDRESS	2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)
<p>MOBILE TEL. BUREAU</p> <p>14 LONGWOOD DRIVE</p> <p>SOUTH LUTTINGTON</p> <p>NEW YORK, NY 11746</p>	INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	CO-INVENTOR'S NAME
	Street Address
	City, State and ZIP Code
	<input type="checkbox"/> Check if additional changes are on reverse side

SERIES CODE/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07754466	09/03/91	046	IN. HARRISON, J	3304 09/20/91

NAME OF APPLICANT: MOBILE TEL. BUREAU

TITLE OF INVENTION: ELECTRONIC HAND HELD LOGIC GATE (AS AMENDMENT)

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
0	270-460.000	P93	UTILITY	YES	\$585.00	10/25/93

3. Correspondence address change (Complete only if there is a change)	4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.
NONE	<p>1. <u>N/A</u></p> <p>2. <u>N/A</u></p> <p>3. <u>N/A</u></p>

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050 MS 10/25/93 07754466 1 242 585.00 CK

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)		6a. The following fees are enclosed:	
(1) NAME OF ASSIGNEE:	<u>N/A</u>	<input checked="" type="checkbox"/> Issue Fee	<input type="checkbox"/> Advanced Order - # of Copies _____ (Minimum of 10)
(2) ADDRESS: (CITY & STATE OR COUNTY)	<u>N/A</u>	6b. The following fees should be changed to:	
(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION	<u>N/A</u>	DEPOSIT ACCOUNT NUMBER _____	
<p>A. This application is NOT assigned.</p> <p><input type="checkbox"/> Assignment is being previously submitted to the Patent and Trademark Office.</p> <p><input type="checkbox"/> Assignment is being submitted under separate cover. Assignments should be directed to Box ASSIGNMENTS.</p> <p>PLEASE NOTE: Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.</p>		<p>(ENCLOSED PART C)</p> <p><input type="checkbox"/> Issue Fee <input type="checkbox"/> Advanced Order - # of Copies _____ (Minimum of 10)</p> <p><input type="checkbox"/> Any Deficiencies in Enclosed Fees</p>	
		The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.	
		(Signature of party in interest of record)	(Date)
		<u>[Signature]</u>	<u>10/4/1993</u>
NOTE: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.			

TRANSMIT THIS FORM WITH FEE-CERTIFICATE OF MAILING ON REVERSE

Certificate of Mailing

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

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Commissioner of Patents and Trademarks
Washington, D.C. 20231

on October 18, 1993
(Date)

(Signature)

NABIL N. GHALY

(Typed or Printed Name)

October 18, 1993
(Date)

Note: If this certificate of mailing is used, it can only be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

This form is estimated to take 20 minutes to Complete. Time will vary depending upon the needs of the individual applicant. Any comments on the amount of time you require to complete this form should be sent to the Office of Management and Organization, Patent and Trademark Office, Washington, D.C. 20231 and to the Office of Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.